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O.I.P.E. 5 SCANNED <u>LK4</u> O.A. <u>[Signature]</u>	PATENT DATE <u>1</u>
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APPLICANTS	APPLICATION NO.	CONT/PRIOR	CLASS	SUBCLASS	ART UNIT	EXAMINER
	09/888757	D	428	511	3702 16-15	William S
TITLE	<p>John Ahern James Crittenden</p> <p>604 57 3763</p> <p>08 903,586</p> <p>Apparatus (Transp.)</p> <p>Systems and methods for local delivery of an agent</p>					
	<p>PTO-2040 12/89</p>					

[illegible]

<input type="checkbox"/> TERMINAL DISCLAIMER	DRAWINGS			CLAIMS ALLOWED	
	Sheets Drwg.	Figs. Drwg.	Print Fig.	Total Claims	Print Claim for O.G.
<input type="checkbox"/> The term of this patent subsequent to _____ (date) has been disclaimed.	_____ (Assistant Examiner) _____ (Date)			NOTICE OF ALLOWANCE MAILED	
<input type="checkbox"/> The term of this patent shall not extend beyond the expiration date of U.S. Patent No. _____	_____ (Primary Examiner) _____ (Date)			ISSUE FEE	
				Amount Due	Date Paid
<input type="checkbox"/> The terminal _____ months of this patent have been disclaimed.	_____ (Legal Instruments Examiner) _____ (Date)			ISSUE BATCH NUMBER	

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